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# County of Los Angeles CHIEF EXECUTIVE OFFICE

Kenneth Hahn Hall of Administration 500 West Temple Street, Room 713, Los Angeles, California 90012 (213) 974-1101 http://ceo.lacounty.gov

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October 30, 2013

To:

Supervisor Mark Ridley-Thomas, Chairman

Supervisor Gloria Molina Supervisor Zev Yaroslavsky Supervisor Don Knabe

Supervisor Michael D. Antonovich

From:

William T Fujioka

Chief Executive Officer

# HOMELESS PREVENTION INITIATIVE (HPI) REPROGRAMING AND ONGOING FUNDING RECOMMENDATIONS REPORT

On June 11, 2013, a motion by Supervisor Ridley-Thomas and Supervisor Yaroslavsky directed the Chief Executive Officer (CEO) to develop recommendations, in consultation with the Los Angeles County Interdepartmental Council on Homelessness (LACICH), to:

1) reprogram the currently unspent HPI onetime funds and ongoing non-district funds starting in Fiscal Year 2013-14; 2) ensure at least 90 percent of the reprogramed funds go to fund permanent supportive housing (PSH) efforts; 3) ensure that 150 Winter Shelter Beds are funded on an ongoing basis; 4) ensure that the recommendations proposed criteria and a methodology to strategically target populations; and 5) to receive input from County Counsel on delegated authority and contracting processes. This provides a response to the June 11, 2013 motion and includes recommendations requested by the Board of Supervisors (Board).

In response to the Board's request, the attached report will provide information on:

- Lessons learned from the HPI
- Best practices for reducing and ending homelessness
- LACICH
- Funding available for reprogramming
- Recommendations by target population

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# **County's Homeless Prevention Initiative**

Based on the Los Angeles County Homeless Authority's (LAHSA's) bi-annual Homeless Count, Los Angeles County has the highest concentration of homelessness in the country. As a result of significant attention on homelessness in Los Angeles County in 2005-2006, the Board of Supervisors approved the Homeless Prevention Initiative (HPI) on April 4, 2006. With an overall goal of reducing and preventing homelessness, this Initiative consisted of two categories of funding: 1) \$19.7M for ongoing programs of which \$4M was existing departmental resources; and 2) \$80M in onetime funding to develop innovative programs. To date, HPI has implemented well over 40 programs and has served thousands of individuals and families.

Although most of the programs that were funded onetime have been expended, the lessons learned from the programs have continued to influence the current operations of many of the County Departments in response to homelessness. For example, the Department of Health Services (DHS) utilized onetime funding to develop and implement a recuperative care model for homeless individuals who no longer require acute care hospitalizations, but who need additional time to recuperate. Due to the success of this program, DHS continues to offer recuperative care services.

#### **Best Practices**

The outcomes that have been accomplished through HPI funding and the coordination and partnerships that were established through the various HPI activities have led to a full understanding that focusing on emergency and transitional housing will not result in a reduction of homelessness. Only permanent housing can end homelessness for all subpopulations. This knowledge has led to the implementation of many best practices and interventions that have resulted in homeless single adults, families and/or youth successfully securing and maintaining permanent housing. In addition, since the implementation of the HPI, several published studies provide evidence that permanent housing with supportive services is the most effective strategy for reducing and ending homelessness from both the financial and long- term outcome perspectives.

Successful strategies have addressed, to varying degrees, the need to secure interim housing, permanent housing, supportive services and a stable source of income. Some of these best practice models are further described in the attached report, and include the following: Permanent Supportive Housing (PSH) programs; Department of Mental Health (DMH) Mental Health Service Act (MHSA) Housing Program; and the Transition Age Youth (TAY) Stabilization 2-Year Demonstration Project.

# Los Angeles County Interdepartmental Council on Homelessness (LACICH)

On January 31, 2012, the Los Angeles County Board of Supervisors adopted a motion authored by Supervisors Zev Yaroslavsky and Mark Ridley-Thomas, with an amendment from Supervisor Knabe, to establish a Los Angeles County Interdepartmental Council on Homelessness (LACICH) to bring together the County health and human service departments and agencies, such as LAHSA, to coordinate the County's efforts to end homelessness in our communities. On November 15, 2012, LACICH released a proposed Roadmap that included recommendations that the County develop more permanent supportive housing, integrated service teams and enhanced funding integration.

The attached report and corresponding recommendations were developed in collaboration with LACICH departmental and agency workgroup members and are aligned with the Roadmap recommendations. The recommendations were presented to LACICH for input at its September 19, 2013 membership meeting.

# **Funding Available for Reprogramming**

There is \$5.6M in potential ongoing HPI funding identified in the below chart that can be reprogrammed or redirected to interdepartmental efforts on an annual basis.

Ongoing Program	Reprogrammed		
	\$4.1M		
DPSS CalFresh and GR Applications at County Jails	0.5M		
DPSS CalFresh and GR at County Medical Centers	0.6M		
Housing Locators/Specialists	0.4M		
TOTAL	\$5.6M		

In addition, there is \$6.8M of onetime unspent HPI funding that is available for programs that did not fully expend their allocations since the inception of HPI. Additional details on the descriptions of the program currently being funded through HPI ongoing and onetime dollars are available on pages 13 and 14 of the report.

The main funding recommendations are described and are shown in the table below:

- 1. Utilization of onetime unspent and ongoing HPI funding for single adults;
- 2. Continuation of ongoing HPI funds for families;
- 3. Utilization of onetime unspent HPI funding for youth; and
- 4. Utilization of ongoing HPI funds for the Winter Shelter Program.

Target Population /Programs	Available I	IPI Funding	Reprogramming Recommendations		
	Onetime	Ongoing	Total Available	Year One	Subsequent Years
Single Adults	\$5.8M	\$5.0M	\$10.8M	\$5.8M	\$5.0M
Youth - 2 year demonstration project (*)	1.0M		1.0M	1.0M	
Winter Shelters		250K	250K		250K
Contingency Funding		350K	350K		350K
Subtotal	\$6.8M	\$5.6M	\$12.4M	\$6.8M	\$5.6M
Families-already accounted for in ongoing HPI funding		\$1.0M	\$1.0M	\$1.0M	\$1.0M

<sup>\*\$1.0</sup>M Funding for the youth demonstration project can be expended within two fiscal years.

## **Recommendations by Target Population**

The workgroup recommendations target three populations: single adults, families, and youth. As instructed, these recommendations emphasize funding for PSH efforts and were developed with a strong consideration for lessons learned and evidence-based best practices. Please note that the report and recommendations primarily focuses on single adults and youth. Families are addressed in a limited degree because there is a separate planning process underway to align and integrate several County homeless family resources into the Homeless Family Solution System.

## Single Adult Model

The concept of this model was developed collaboratively by DMH, DHS, Department of Public Social Services (DPSS), and Department of Public Health (DPH), the LACICH workgroup members that are most impacted by the single adult homeless population. The goal is to develop a model that meets the needs of the target population with some focus on the most disabled homeless individuals who historically have had significant difficulty navigating and being served by our County systems of care.

Establish a single adult model to provide an infrastructure to reduce homelessness
for the single adult population which can be built upon in subsequent years as
lessons are learned. The model will be a collaborative partnership between multiple
county departments and will include multidisciplinary integrated teams (MITs) to
provide street and shelter-based intensive engagement and support; rental
subsidies; ongoing case management; and supportive services.

The components of the model are as follows:

- Establish several **Multidisciplinary Integrated Teams** (MITs) throughout Los Angeles County to provide intensive engagement of street and shelter-based homeless with the goal of securing permanent housing with supportive services. This component should be administered by DMH.
- A rental subsidy component, administered by DHS and supported by County Departments for homeless individuals who need supportive services to secure and maintain permanent housing. This component will provide provisions for contributions from other county departments or funding sources.
- Mobile and flexible wrap-around supportive services for those individuals permanently housed to keep them maintained in housing.
- A methodology to efficiently and effectively secure Supplemental Security Income (SSI) or other income source for all participants.
- 2. Direct the County departments and the Community Development Commission (CDC), in consultation with the CEO and County Counsel, to develop operating procedures and/or agreement for the single adult model to be a collaborative and seamless system of care and to identify a director for the effort.
- 3. Direct the County departments and CDC, in consultation with the CEO, to develop an implementation plan for the single adult model utilizing the identified \$5.8M to support the start-up costs and year one of the program and utilizing \$5.0M of the annual ongoing dollars for year two and subsequent years.

#### **Families Model**

In February 2013, a Family Solution System (FSS) was initiated within 7 regions of Los Angeles County to rapidly re-house and provide supportive services for homeless families. Continuation of HPI support is critical for homeless families to receive the appropriate housing intervention given their needs. In addition, there is a separate process underway to realign two DPSS funded homeless families programs with the FSS to improve permanent housing outcomes for homeless families.

4. Continue to fund \$1.0M annually for the Homeless Families Solution System.

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#### Youth Model

The concept of this model was developed collaboratively by Department of Children and Family Services (DCFS) and DMH, the LACICH workgroup members that are most impacted by the youth homeless population. The target for the demonstration is youth emancipating from the dependency and/or delinquency systems with mental illness and multiple challenges that very often result in them falling through the cracks or being labeled as too difficult and/or service resistant.

5. Direct DMH, DCFS and Probation, in consultation with CEO, to establish a two year Homeless Youth Permanent Supportive Housing Demonstration Project for youth emancipating from the dependency and/or delinquency systems with mental illness and multiple challenges including co-occurring disorders utilizing the identified \$1.0M to support the two year Demonstration Project.

# Winter Shelter Program Recommendation

6. Provide LAHSA with up to \$250,000 additional funding on an annual basis to provide up to 135 additional winter shelter beds.

# Other Motion Responses and Next Steps

The June 11, 2013 motion also included two amendments, one of which called for resources to be allocated "based on geographic burden and need as determined by the latest homeless count results for the Los Angeles, Glendale, Pasadena and Long Beach continuums of care." To accomplish this, it is recommended that HPI resources be disbursed by service planning areas based on the latest homeless counts of the aforementioned continuums of care.

The second amendment instructed the CEO to report back to the Board during the final 2013 budget process with specific recommendations to justify additional HPI resources. The CEO did not request additional funding during the supplemental budget period.

Upon approval of these recommendations, detailed implementation plans and budgets will be prepared within 120 days for the single adult and youth models. They will be developed by the County departments and CDC in consultation with the CEO and will be brought to your Board for consideration during Recommended Budget if additional funding is needed. The models will have an anticipated start-date of July 1, 2014.

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If you have any questions or need additional information, please contact Antonia Jiménez at (213) 974-7365, or via email at <a href="mailto:ajimenez@ceo.lacounty.gov">ajimenez@ceo.lacounty.gov</a>.

WTF:AJ EB:MDC:km

c: Executive Office, Board of Supervisors
County Counsel
Community Development Commission
Children and Family Services
Health Services
Housing Authority of the City of Los Angeles
Los Angeles Homeless Service Authority
Mental Health
Probation
Public Health
Public Social Services

HPI Reprogramming 10-17-13.bm Final





# COUNTY OF LOS ANGELES Homeless Prevention Initiative (HPI)

Reprogramming and Ongoing Funding Recommendations Report

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#### Background

This report serves to address a June 11, 2013 Board motion co-authored by Supervisors Mark Ridley-Thomas and Zev Yaroslavsky to apply lessons learned implementing the Homeless Prevention Initiative (HPI) over the last seven years. The motion directed the Chief Executive Officer (CEO) to develop recommendations, in consultation with the Los Angeles County Interdepartmental Council on Homelessness (LACICH); to reprogram HPI unspent onetime funds and ongoing non-district funds in a manner that promotes permanent supportive housing and best practices. In addition, the motion directed the CEO to develop recommendations that reprograms resources based on geographic burden, to ensure 150 winter shelter beds are funded on an ongoing basis, and to strategically target particular homeless populations.

Based on the Los Angeles County Homeless Authority's (LAHSAs) bi-annual Homeless Count, Los Angeles County has the highest concentration of homelessness in the country. There are likely several reasons that have contributed to this crisis including but not limited to the warm weather, vastness of our size, and high rental costs as compared to average job earnings. As a result of significant attention on homelessness in Los Angeles County in 2005-2006, the Board of Supervisors approved the Homeless Prevention Initiative (HPI) on April 4, 2006. This Initiative consisted of two categories of funding: 1) \$19.7M for ongoing programs of which \$4M was existing departmental resources; and 2) \$80M in onetime funding to develop innovative programs. Both funding categories were to focus on reducing or preventing homelessness. To date, HPI has implemented well over 40 programs and has served thousands of individuals and families.

The initial goals of the HPI were the following:

Goal 1 –	Preventing Homelessness	Goal 2 – Reducing Homelessness		
■ Hou	ising assistance		Community capacity building	
■ Disc	charge planning	▮■	Regional planning	
		■	Supportive services integration linked to housing	
	,	<b>=</b>	Innovative program design	

Although most of the programs that were funded onetime have been expended, the lessons learned from the programs have continued to influence the current operations of many of the County Departments in response to homelessness. For example, the Department of Health Services (DHS) utilized onetime funding to develop and implement a recuperative care model for homeless individuals who no longer require acute care hospitalizations, but who need additional time to recuperate. The shelter system cannot accommodate individuals who have extreme physical vulnerabilities nor do they allow individuals to remain on-site 24/7. Thus, DHS developed the recuperative care program to address this gap in available resources. Recuperative care was funded by HPI for four years.

However, when the onetime funding was expended, DHS continued to offer this resource because the model clearly indicated that it was successful and resulted in significant cost avoidance.



In addition to lessons learned through HPI funding opportunities, over the years there have been several complementary efforts that have influenced the County departments' abilities to greatly leverage HPI programming and address homelessness. Some of these efforts include:

- Special Needs Housing Alliance, a County Departmental Task Force which focused on establishing partnerships with affordable and special needs housing developers, County departments and supportive service providers.
- Service partnerships between Department of Mental Health (DMH) certified mental health clinics and Federally Qualified Health Clinics to provide the integrated supportive services needed to assist clients that are homeless with accessing permanent housing opportunities.
- Home for Good, a collaborative effort led by United Way of Greater Los Angeles which brought together the public, private and business sector with the goal of ending chronic and Veteran homelessness by 2016. As part of Home for Good implementation, public and private funders created a Funders Collaborative to align funding for permanent supportive housing. Through this collaboration, thousands of chronically homeless individuals and veterans have been permanently housed with supportive services.

#### **Best Practices**

The outcomes that have been accomplished through HPI funding and the coordination and partnerships that were established through the various HPI activities have led to a full understanding that focusing on emergency and transitional housing will not result in a reduction of homelessness. Only permanent housing can end homelessness for all subpopulations. This knowledge has led to the implementation of many best practices and interventions that have resulted in homeless single adults, families and/or youth successfully securing and maintaining permanent housing. In addition, since the implementation of the HPI, several published studies provide evidence that permanent housing with supportive services is the most effective strategy for reducing and ending homelessness from both the financial and long- term outcome perspectives.

Successful strategies have addressed, to varying degrees, the need to secure interim housing, permanent housing, supportive services and a stable source of income.

Some of the best practice models include the following:

Permanent Supportive Housing (PSH)- Is defined as any housing that is permanent (with no required date of exit), including market-rate rentals and rental units in affordable or special needs housing developments, which is paired with a rental subsidy and supportive services to promote housing retention. These services include, but are not limited to case management, health, mental health, substance abuse services. Through the Community Development Commission (CDC) and several of our health and human services departments, we have assisted in the development and implementation of many permanent housing units that include intensive supportive services. Project 50 is an example of one of the first County collaborative PSH efforts which is now an evidence-based practice that has resulted in substantial savings for the County.

- DMH Mental Health Service Act (MHSA) Housing Program- MHSA funding for capital and operating expenses which will support the development of over 850 new PSH units for severely mentally ill individuals and includes supportive services to ensure well-being, stability and retention in housing.
- Transition Age Youth (TAY) Stabilization 2-Year Demonstration Project—This project provides permanent housing in market rate rentals with intensive case management and services focused on getting youth employed, able to pay their own rent, and self- sustaining. The success of this model has resulted in a significant redesign of the Department of Children and Family Services (DCFS) Independent Living Program to support quick access to permanent housing opportunities.

## Los Angeles County Interdepartmental Council on Homelessness (LACICH)

On January 31, 2012 the Los Angeles County Board of Supervisors adopted a motion authored by Supervisors Zev Yaroslavsky and Mark Ridley-Thomas with an amendment from Supervisor Knabe to establish a Los Angeles County Interdepartmental Council on Homelessness (LACICH) to bring together the County health and human service departments and agencies such as LAHSA to coordinate the County's efforts to end homelessness in our communities. On November 15, 2012, LACICH released a proposed Roadmap that included recommendations that the County develop more permanent supportive housing, integrated service teams and enhanced funding integration.

This report and corresponding recommendations were developed in collaboration with LACICH departmental and agency workgroup members and are aligned with the Roadmap recommendations. The recommendations were presented to LACICH for input at the last membership meeting on September 19, 2013.

#### **Funding Available for Reprogramming**

There is \$5.6M in potential ongoing HPI funding that can be reprogrammed or redirected to interdepartmental efforts on an annual basis. In addition, there is \$6.8M of onetime unspent HPI funding that is available which has accrued from several onetime and ongoing HPI programs that did not fully expend their allocations since the inception of HPI.



The chart below depicts the recommendations for reprogramming \$5.6M of ongoing funding available on an annual basis to support the proposed models.

Table I: HPI Ongoing Program Chart

		Recomme	ndations			
Ongoing Program	Annual Alloc	Continu -ation	Re- program	Description		
DPSS GR, Housing Subsidy & Case Mgmt	\$4.1M		\$4.1M	<b>Reprogram</b> funding to implement a single adult model of care so that the County has one infrastructure for rental subsidies, supportive services and SSI advocacy.		
DPSS CalFresh and GR Applications at County Jails	1.1M	0.6M	0.5M	<b>Reprogram</b> \$0.5M to support the single adult model of care. Continue funding DPSS for \$0.6M to focus on SSI advocacy and to participate in the Sheriff Dept's future plans for discharge and implementation of the Health Care Reform.		
Family Solution System (FSS)	1.0M	1.0M		Maintain existing funding for FSS to provide regionally based rapid re-housing activities and rental subsidies for homeless families.		
DPSS CalFresh and GR at County Medical Centers	0.6M		0.6M	<b>Reprogram</b> as the program outcomes were never realized.		
Homeless Court	0.4M	0.4M	<del></del>	Maintain existing funding for the Homeless Court to expunge non-violent and non-victim misdemeanors to assist homeless individuals in accessing permanent housing resources.		
Homeless Family Access Center (HFAC) at Skid Row	0.4M	0.4M		Maintain existing funding for DCFS to have a presence in Skid Row to assess and divert homeless families.		
Housing Locators/Specialists	0.4M		0.4M	<b>Reprogram</b> as this program was not fully implemented and ended in 2008.		
Housing Database	0.2M	0.2M		Maintain existing funding for a database of available rental units in Los Angeles County.		
Prototype Court	0.2M	0.2M		Maintain existing funding for the Prototype Court to provide alternate sentencing for homeless individuals with co-occurring disorders.		
TOTAL	\$8.4M	\$2.8M	\$5.6M			



In addition, the chart below depicts \$6.8M of onetime funding available which has accrued from several onetime and ongoing HPI programs that did not fully expend their allocations since the inception of HPI.

Table II: HPI Onetime Savings Available for Reprogramming Chart

Program	Onetime or Ongoing	Savings	Description
Community Outreach and Collaboration Strategies	Onetime	\$204,440	This program is no longer operational.
Homeless Family Respite Center	Onetime	825,000	This program has been implemented and is operational in South Los Angeles.
Moving Assistance for Transition Age Youth (TAY)	Onetime	3,000	This program is no longer operational.
Discharge of Hospital Patients	Onetime	50,576	This program has been continued and is funded by DHS.
Homeless Family Access Center (HFAC) at Skid Row	Ongoing	1,000,000	This program is still operational; however the funding level has been reduced to align with programmatic need.
Housing Locators/ Specialists	Ongoing	800,000	This program is no longer operational.
DPSS Applications at County Medical Centers	Ongoing	790,838	This program will be discontinued because outcomes were never realized.
Winter Shelter Program	Onetime	(\$283,738) FY 12-13 (\$160,251) FY 13-14	Some of the savings in this table were reprogrammed in prior years to provide additional winter shelter beds.
	Onetime	\$3,581,537	Reflects savings generated due to clean up of prior year encumbrances and commitments for completed projects.
TOTAL		\$6.8M	

In reviewing the total funding available, the below target population recommendations will require the following:

- Utilization of onetime unspent and ongoing HPI funding for single adults;
- Continuation of ongoing HPI funds for families;
- Utilization of onetime unspent HPI funding for youth; and
- Utilization of ongoing HPI funds for the Winter Shelter Program.

#### **Target Populations**

LACICH focuses on four subpopulations: youth, families, chronically homeless and veterans. The target populations being recommended for funding in response to the June 11, 2013 HPI Reprogramming Motion are single adults, including chronically homeless; families; and youth. According to the 2013 Homeless Count, 86% of the homeless are single adults; which represents the subpopulation with the highest increase in homelessness since the 2011 Homeless Count.



In February 2013, a Family Solution System (FSS) was initiated within 7 regions of Los Angeles County to rapidly re-house and provide supportive services for homeless families. Continuation of HPI support is critical for homeless families to receive the appropriate housing intervention given their needs. In addition, there is a separate process underway to realign two Department of Public Social Services (DPSS) funded homeless families programs with the FSS to improve permanent housing outcomes for homeless families.

Youth will also be recommended for funding to demonstrate how the four elements of solving homelessness, in differing doses and with varied interventions, can be applied to solve youth homelessness.

Veterans are not being specifically targeted because any large scale effort to solve veteran homelessness must be led by the Veterans Administration. However, veterans will certainly be among those served in the single adult, families and youth models of care that are being recommended.

#### **Target Population Models**

#### SINGLE ADULT MODEL

The concept of this model was developed collaboratively by DMH, DHS, DPSS, and Department of Public Health (DPH), the LACICH workgroup members that are most impacted by the single adult homeless population. To ensure that a comprehensive and successful single adult model of care is implemented, the effort would be a collaborative of the CEO, DHS, DMH, DPSS, DPH, and CDC. The leadership structure would entail an Executive Steering Committee of decision-makers from each department within the collaborative to provide executive direction related to staffing, administrative, problem solving, regulatory, and funding issues. A Director would be assigned to the project full-time to provide day-to-day leadership and management functions. This Director should be an employee of DHS or DMH.

The single adult model components include:

1. Multidisciplinary Integrated Teams (MITs) - Departmentally staffed and/or community driven teams to focus on regular engagement with street and shelter-based homeless to encourage and support permanent housing with needed supportive services. The MITS will assist targeted homeless to access permanent housing through rental subsidies described below or through other housing resources. The collaborative departments and community based agencies will ensure needed supportive services are provided, housing location assistance, and if appropriate, a warm hand-off will be conducted once permanent housing is secured and the individual is stable.

Potential opportunities for collaborations and leveraging or redirection of resources or staffing include:

- Community based providers
- DMH Home Team or other appropriate staff
- DHS Homeless Services Master Agreements or other appropriate staff assignment



- DPH-Substance Abuse Prevention and Control (SAPC) redirection of alcohol and drug provider staff
- DPSS Homeless Case Management and/or SSI advocacy
- LAHSA directly operated or subcontracted outreach services
- Foundation funding (particularly when funding can match county or other governmental resources) such as is available through the Home for Good Funders Collaborative
- 2. **Rental Subsidies** A locally funded flexible resource for rental subsidies is critical to solving homelessness. This component must include housing location assistance. In addition, this resource can be used to partner with permanent supportive housing development projects.

Potential opportunities for collaborations and leveraging or redirection of resources or staffing include:

- Redevelopment funding
- · County departments with housing programs such as DMH, DHS, and DPSS
- Foundation funding (particularly when funding can match county or other governmental resources)
- CDC, Los Angeles Housing Department (LAHD), other affordable housing funders
- Other Los Angeles County Housing Authorities
- 3. **Interim Housing** Shelter, stabilization, motel vouchers, recuperative, residential substance abuse beds to immediately house targeted individuals until permanent housing unit can be secured.

Potential opportunities for collaborations and leveraging or redirection of resources or staffing include:

- DMH shelter resources
- DHS- Housing for Health interim housing (stabilization and recuperative care)
- DPH-SAPC redirection of alcohol and drug provider staff
- DPSS- shelter or motel vouchers
- LAHSA shelter system
- Foundation funding (particularly when funding can match county or other governmental resources) such as is available through the Home for Good Funders Collaborative
- 4. **Supportive Services** Whatever it takes to keep individuals stable, retained in permanent housing and as healthy as possible is the focus of supportive services to be wrapped around each individual. The amount and type of services should be based on the needs and challenges of each individual. Access to eligible public benefits and/or employment is the first priority of supportive services. The MITs and the supportive services team can be two different teams that work together OR can be the same team depending on available resources, the particular region being served, the best approach to reach the permanent housing goals and/or other factors that may arise.



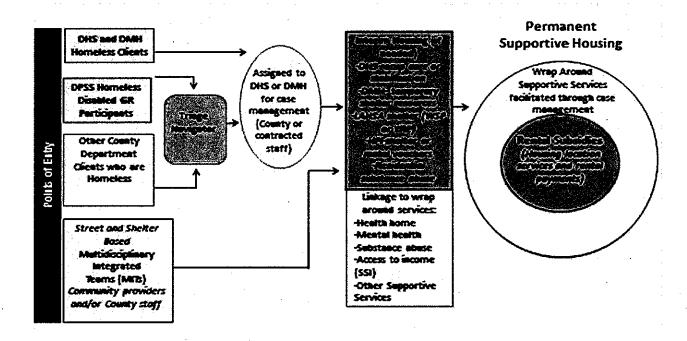
Potential opportunities for collaborations and leveraging or redirection of resources or staffing include:

- DMH services
- DHS- Housing for Health services
- DPH-SAPC services
- DPSS services
- Foundation funding (particularly when funding can match county or other governmental resources) such as is available through the Home for Good Funders Collaborative

Below is a pictorial of the single adult model concept.

# Single Adult Model





#### RECOMMENDATIONS FOR SINGLE ADULT MODEL

1) Establish a **single adult model** to provide an infrastructure to reduce homelessness for the single adult population which can be built upon in subsequent years as lessons are learned. The model will be a collaborative partnership between multiple county departments and will include multidisciplinary integrated teams (MITs) to provide street and shelter-based intensive engagement and support; rental subsidies; ongoing case management; and supportive services.



The components of the model are as follows:

- Establish several Multidisciplinary Integrated Teams (MITs) throughout Los Angeles County to provide intensive engagement of street and shelter-based homeless with the goal of securing permanent housing with supportive services. This component should be administered by DMH.
- A rental subsidy component, administered by DHS and supported by County Departments for homeless individuals who need supportive services to secure and maintain permanent housing. This component will provide provisions for contributions from other county departments or funding.
- Mobile and flexible wrap-around supportive services for those individuals permanently housed to keep them maintained in housing.
- A methodology to efficiently and effectively secure Supplemental Security Income (SSI) or other income source for all participants.
- 2) Direct County departments and CDC in consultation with the CEO and County Counsel to develop operating procedures and/or agreement for the single adult model to be a collaborative and seamless system of care and to identify a director for the effort.
- 3) Direct the County departments and CDC in consultation with the CEO to develop an implementation plan for the single adult model utilizing the identified \$5.8M to support the start-up costs and year one of the program and utilizing \$5.0M of the annual ongoing dollars for year two and subsequent years.

#### **FAMILIES MODEL**

The Family Solution System (FSS) received \$1.0M from HPI to develop and pilot a collaborative and regional approach to homeless families. The goal of this model is to get homeless families permanently housed rapidly and to ensure they are connected to needed supportive services within their community of origin. In addition to HPI funding, this effort included HUD Emergency Solution Grant (ESG) funding from both the County and City of Los Angeles. Currently, the CEOs office is working in collaboration with DPSS on a redesign plan to better align and integrate the FSS with DPSS homeless family resources including Homeless CalWORKS Family Program (HCFP) and Emergency Shelter and Services (ESS). This plan is scheduled to be released in late October/early November 2013.



#### RECOMMENDATION FOR FAMILIES MODEL

1) Continue to contribute \$1.0M annually for the Homeless Families Solution System.

#### YOUTH MODEL

The concept of this permanent supportive housing demonstration was developed collaboratively by DCFS and DMH, the LACICH workgroup members that are most impacted by the youth homeless population. The target for the demonstration is youth emancipating from the dependency and/or delinquency systems with mental illness and multiple challenges that very often result in them falling through the cracks or being labeled as too difficult and/or service resistant.

The youth model components include:

1. **Rental Subsidies** - As described above in the Single Adult Model section, with an objective of single occupancy or shared apartments with youth considered well matched.

Potential opportunities for collaborations and leveraging or redirection of resources or staffing include:

- DMH departmental/MHSA funding
- DCFS resources
- Probation resources
- 2. **Supportive Services** The supportive services should include intensive case management and employment/educational assistance to help youth find and maintain stability in employment and/or educational opportunities. The services should consistently emphasize strengths, good decision making, coping skills, etc.

#### RECOMMENDATION FOR YOUTH MODEL

1) Direct DMH, DCFS and Probation in consultation with CEO to establish a two year **Homeless Youth Permanent Supportive Housing Demonstration Project** for youth emancipating from the dependency and/or delinquency systems with mental illness and multiple challenges including co-occurring disorders utilizing the identified \$1.0M to support the two year Demonstration Project.

#### WINTER AND YEAR ROUND SHELTER

Historically, winter shelter beds have been implemented in the cold weather months as a safety net to avoid homeless individuals dying on the street due to the elements. The winter shelter programs are generally open 12 hours out of the day from early evening through early morning. They offer individuals a bed, shower and meals as well as some limited case management. The County provides LAHSA with approximately \$1.0M annually for about 540 winter shelter beds. Based on national best practices, research and local lessons learned, interim housing including winter and



year round shelters are a critical element to securing permanent housing for homeless individuals and must be included in the design of the single adult model described above.

#### RECOMMENDATION FOR WINTER SHELTER PROGRAM

1) Provide LAHSA with up to \$250,000 additional funding on an annual basis to provide up to 135 additional winter shelter beds.

#### **Next Steps**

Upon approval of these recommendations, detailed implementation plans and budgets will be prepared within 120 days for the single adult and youth models. These plans and budgets will identify performance outcomes and a plan for programmatic evaluation. They will be developed by the County departments and CDC in consultation with the CEO and will be brought to your Board for consideration if additional funding is needed. The models will have an anticipated start-date of July 1, 2014.

#### Conclusion

There has been much work accomplished by the County since the inception of HPI in 2006. Our experiences implementing the HPI as a County family has led to our shared understanding that permanent housing with supportive services is the key to addressing all homeless subpopulations. Our collective work has set the stage for us to focus the valuable HPI resources on integrating our various departmental efforts to implement more permanent housing and supportive service opportunities throughout Los Angeles County.

